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THE MEDICAL WORK

IN

FOREIGN MISSIONS.

BY

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Read before the International Missionary Union

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The Medical Work in Missions.

BY REV. EDWARD CHESTER, M. D., INDIA.

Read before International Missionary Union, 1888

The time has passed for the necessity of urging the importance of the medical in connection with other forms of mission work. And more than ever before, most missions are feeling that the medical work must be cared for and valued, just as are the educational, the evangelistic and the congregation and church work, and that for women and girls.

There will be cases where the particular circumstances of location, custom, a deficiency of fund, or a paucity of laborers may render it almost impossible to carry on every form of mission work. But in a mission with a sufficient force, not cramped for funds, and with ability to undertake the various forms of mission work, the medical work should be conducted with the same care and energy as the educational or other form of labor.

The statement that the medical work is very expensive, almost as much so as the educational, will not be found true in all cases. And it is a question whether it may not always be almost self-supporting. Certain it is that the medical man himself in each locality may do very

much to make this work in a mission inexpensive, and it depends greatly upon him whether it is popular with the people and a success or not.

I would start with the proposition that, in organizing any new mission in a locality where none had existed before, the medical work should be given a place, as much as the educational or the work of preaching. And even in missions of long standing, if the medical work has not been entertained, I would urge a trial of it, with an eye to the great gain it would be to the mission.

My second point would be that the medical work in a mission must be eminently evangelistic, and in harmony with all the other work of the mission.

A third consideration is that if the medical work is taken up at all in a mission, it must be a thorough and efficient work—one which will command the respect and regard of all classes.

Fourth, and lastly, the exigency of the times demands a much larger force of medical men and women upon mission fields

1. The medical work should be given a place in every well organized mission. I do not mean the having one or even more men in a mission who know a little about medicine, or even have a degree, providing they confine their medical work to the limits of their own family and servants, or even the families of the catechists and teachers living at headquarters. Nor do I mean an occasional taking up of the medical work for a week or two, and then giving it up for months at a time. With the same expectation of permanency as you would commence a high school or boarding school at headquarters, with the same use of recognized appliances,

the same amount of energy and system in carrying on the work, and the same generosity in the use of funds for necessary expenses, thus only is it of any real use to conduct the medical work in missions. One or more dispensaries at important centers, a hospital, if the funds will allow, and accommodation in this for at least a dozen in-patients, a good supply of inexpensive medicine so that all the out-patients as well, who attend the dispensary, may receive a supply of medicine; a sufficient staff of native trained assistants to prescribe, compound, and look after surgical cases and with a sufficient stock of surgical instruments for all minor operations. All these are necessary for a successful medical work in a mission.

I have for years, in my mission work in India, found it wise, as enabling me to save myself for more important work to do nothing myself which could be about as well done by a native. It is on this line that I have always had, in my work in the Dindigal Dispensary, such a staff of native assistants, that I could trust the work to them for a few days at a time, when obliged to be myself out in the villages In short, I think that in the medical work in missions, as in the educational work, those steps must be taken, which will insure success. The natives of India are clever enough to know which are the best schools, the government or the mission schools, and choose the best, which are, as a rule, the latter, even though they know they will have to give an hour a day, for five days of the week, to the study of the Bible. And just so is it with dispensaries in India. As a rule, the mission dispensary is the most popular and has the largest attendance. And it is good policy for

any mission to make its schools and its dispensaries the best in the market.

To the work of the dispensary and the hospital already noted, I would add, to be attended to, if possible, by the medical missionary, the training of good native men and women for the work of hospital assistants and nurses. Then native Christians could be selected, and a choice made among these, so as to secure those who would add evangelistic to their medical work.

I would give the medical work a place in every well organized mission, because I believe that, in a very special degree, it adds to the efficiency of every branch of mission work, and makes the work, as a whole, more successful.

I would do so, also, because I think that it furnishes, in the course of a year, a very large number of most attentive and interested hearers of the gospel, not to say scholars. I would do so because I think it gives us an entrance into many houses, and an intimacy and friendship with many of the more intelligent, respectable and influential natives, such as could be secured in no other way. And all this quite aside from the positive good resulting from the relief of suffering and saving of life.

2. But I pass to the second point, that the medical work in a mission must be eminently evangelistic and in harmony with all the other work of the mission. The more skilful the medical missionary as a physician, the more clever as a surgeon, the better for the work and for making it a success, so far as popularity goes. But it will not be a success as a mission work unless the saving of souls is ever brought to the front as the main object to be accomplished, and unless the medical mis-

sionary is eminently a spiritual man with much of the mind of Jesus. As in New England of old, the church and the schoolhouse were side by side, and each helping the other, so should the church and the schoolhouse and the dispensary, on mission ground, work into one another's hands and be eminently fellow-workers. In a mission dispensary, both among the out and the in-patients, there is ample opportunity for making known the gospel. And oftentimes the patients are in such a state of mind that they may truly be said to hear the Word gladly. In every part of our mission work we turn to the Lord Jesus as our great example. But eminently in the medical work must we follow His example in striving to reach the heart and save the soul by showing our desire to relieve suffering, to heal the sick, to give sight to the blind, and hearing to the deaf. The medical work in missions is nothing, save as it helps to show to the heathen that the divine Christ is the center, the soul and the life of Christianity, and that we are His disciples and followers.

3. Our third consideration is that if the medical work is taken up at all in a mission, it must be a thorough and efficient work, one which will command the respect and regard of all classes. In all cases with which I am acquainted in India, the medical missionary has become proficient in the vernacular, so that he speaks with his native patients without the help of an interpreter. This is seldom the case with the civil or government dispensaries. But this greatly pleases the natives, especially the women. Then, with hardly an exception, the rule in a mission dispensary is one of kindness. Not only is the medical missionary very careful to gain the affection

of the native patients by his invariable kindness, but he insists upon his native assistants in the dispensary following his example. And here the natives are not slow to mark the difference between the mission and the other dispensaries.

But, important as it is to let the law of the dispensary be a law of love, other things must be added. The work of the dispensary must be carried on with the greatest regularity, precision and care. It must be decidedly first-class work. There is no place here for half-way work, skimping or sham. He who is not willing to give his whole time, his whole heart, and his whole love to the medical mission work, had better leave it alone altogether. The loathsome leper must have our best care as well as the simple cases of fever. Cases of cholera and small-pox can no more be avoided or neglected than the farmer neglect to feed his horses or cattle The best results, which only follow the best service, must gain for a mission dispensary a good name. Let no one imagine that a mere smattering of medical matters, the knowledge of medicine which would be picked up in reading a few pages here and there of the books denominated "Medicine for the Family" would suffice to enable a man to have charge of a dispensary in India, Japan, China or Africa, where. in the course of a month, there may present themselves almost every form of medical disease and surgical of which our best American medical text books inform us. And a medical missionary has seldom the opportunity of holding a consultation with a brother doctor, even in a dangerous case, requiring, perhaps, a most difficult surgical operation. The nearest European doctor, as in the case of the writer,

may be 38 miles away, and the medical missionary may have to treat all his medical cases and decide upon all his surgical operations entirely by himself. If a mission would have the medical work a success, it must be willing to take pains to secure a really efficient workman and grudge no expenditure which is necessary to secure him a competent corps of native assistants and a fair supply of surgical instruments and medicine.

The medical mission work has been found to pay, and to pay well, in all cases where it has been conducted properly and in a liberal spirit. Instances to prove this could be given by the hour. Thorough work and the best, carried on in love to Christ and souls, and for Christ's sake, this must be the motto and life of all successful medical mission work.

4. Fourth, and lastly, the exigency of the times demands a much larger force of medical men and women in mission fields. I can speak of India from what I know of the state of mission work there, after an experience of twenty-eight years. But what I note of India, I think, I may, with equal force and truth, say of China, Japan, Turkey, Persia and Syria. Never before has there been such an interest felt in medical mission work; never before such an opportunity afforded for reaching the people through the dispensary. In India the Lady Dufferin scheme has excited an intense interest throughout the whole of India in the medical work for women, and though more lady physicians have come out to India in connection with the various evangelical missions during the past ten years than in all previous years, yet it seems to-day as if there were places for scores more. And in the medical mission work for women, in all the

countries noted above, there is, perhaps, the strongest argument for the importance of the medical mission work, the strongest ground of its great necessity as a part of mission work, than can possibly be given. I need not take from any table of statistics the proportion of women to men in the population of the prominent countries of the East. Their number is immense. And with all this countless number of women and girls there is no possible way of reaching them and influencing them, and blessing them, which will compare with that in the power of the Christian lady physician. To every lady physician now on the ground, in the countries noted above, if there were ten, yes, a score, it would not be one too many for the great and important work the Lord is giving to just this class of Christian laborers.

And the number of male medical missionaries should be greatly increased. We can do much of our work through our native Christians, but they require to be trained for special work. We can never, in any heathen or Muhammadan country, expect to have all the European or American laborers required for the evangelization of these countries. We must call to our aid the natives of the different countries. But for aid in Christian work the missionary must train them for each specific form of mission work. For the medical work, both among men and women, many more native men and women need to be carefully trained, and this is an important work devolving on the medical missionary.

I have already alluded to the large and appreciative audiences which the medical missionary has in his dispensaries. Even for this purely evangelistic work we need more medical missionaries. And I can speak from

personal experience when I say that with an efficient corps of trained native assistants in his dispensaries the medical missionary can do a great deal of evangelistic work. For 24 years I have been compelled, from the smallness of our mission force, to have charge of a large and important station, with its churches and congregations, and schools of various grades, and the work of the itineracy, or preaching in heathen villages, while carrying on all my medical work. An English service every Sunday evening, with an English sermon, has been thrown in as a matter of simple recreation. It has truly, however, been a great pleasure.

That my Dindigal Dispensary has been of the greatest help to me in my general mission work, I have had many proofs. I have gained the good will of the people; our native pastors and catechists can preach and sell Scripture portions and tracts in any part of the station without any fear of insult or opposition. They are listened to with the greatest interest. I would receive a welcome in the house of any man in the whole of the Dindigal District. I find it more easy, on this very account, to establish schools in the villages, and I receive more money from the people for their support. And the Dindigal Dispensary and Hospital, with about 9,000 new cases every year, and 20,000 old cases, or those coming more than once to the dispensary, and patients coming in the same period from 500 and more different villages, have cost the mission nothing these 24 years, from the first year they were established. For my services, which I am only too glad to give gratuitously, the English Government gives me the whole cost of the dispensary establishment, all the

medicines required each year, and all the surgical instruments and hospital appliances. The American Board of Foreign missions kindly gave me the money for the hospital and dispensary buildings, which secures these permanently to the mission.

And I see no reason why the English Government would not grant this favor in any part of India, if satisfied that a medical work in a given locality is needed, and will be carried on efficiently.

After these twenty-eight years in India, watching with intense interest the work in various missions and various localities, I have been forced to the conviction that it is not best to undertake any one form of mission work at the expense of the others, but rather have them all carried on with as much skill and energy as possible, letting each help and support the other. I would not, therefore, exalt the medical work beyond others, which for many years have been found worthy of trial. I would, however, strive to have this work given the place it deserves and fairly tried.

When we see in England and America the splendid buildings which are being erected for hospitals, when we know what large amounts are necessary to carry them on successfully, we cannot believe that this medical work is being tried, and the large expenditure made without careful consideration. More costly hospitals are being built and a larger expenditure incurred, because it is known that the work appeals to the interest and sympathy of the whole people. And none the less is this medical work needed in heathen lands. We cannot conduct it on such a magnificent scale as in this country. It is not necessary. But we can show the heathen, in a

much less expensive manner, the same lesson of the gospel and how the Lord and Master cared for His fellow men, and went about doing good to all. A mission dispensary on heathen ground is a beautiful and striking object lesson. It is ever educating the heathen in the first principles of the gospel. Its golden word is "Love," its motto, "Therefore, all things whatsoever ye would that men should do to you, do ye even so to them."